

HUNTINGTON TOWNSHIP
45955 State Route 162
WELLINGTON, OH 44090
440-828-0021

APPLICATION FOR CONDITIONAL USE / ZONING VARIANCE
ZONING BOARD OF APPEALS
PLEASE PRINT

Name of Applicant Property Owner: _____ Date: _____

Mailing Address: _____

Home Phone: _____ Business Phone: _____ Cell: _____

Permanent Parcel Number: _____ Road Frontage: _____

Depth of Lot: _____ Total Acreage: _____

Business Will be Organized As: _____ Proprietorship _____ Corporation _____ Partnership

Name of Proposed Business: _____

Please answer the following questions.

1. How many people will be involved in your business?
2. What type of product will be produced, serviced, sold, or stored in association with your business?
3. Will any part of your home be used to conduct your business? Please describe what part of your home will be used and the amount of square feet the activity will consume?
4. Will any accessory buildings be used in your business? Please describe what buildings will be used and their dimensions and square footage.
5. Will outside storage and/or parking be required? If so please describe in detail how much outside storage and/or parking.
6. Will a sign be mounted or erected to advertise your business? Please describe location and include dimensions of sign.

7. If trucks, construction equipment, or other equipment will be used in your business where will they be stored?

8. Will your business required the use of commercial delivery vehicles to or from your business? If so please explain.

9. Will people come to your house to utilize your business product or service; please explain.

10. What are your proposed hours of operation?

11. Does your business conform to all conditions, restrictions, and covenants pertaining to your property?

Checklist of other materials and information required:

- Names and addresses of adjacent property owners, including those across the street.
- Plot map with the following details: property dimensions, building locations and dimensions, sign location, outside storage area with dimensions, and parking area with dimensions.

Signature of Applicant: _____

Signature of Township Official: _____

Date: _____

Date of Hearing: _____

Board of Action: _____ Approval _____ Denial

Members Signatures: